

STATEMENT OF ECONOMIC INTERESTS

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FAIR POLITICAL  
PRACTICES COMMISSION

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SU

MARY

1. Office, Agency, or Court

Agency Name

CITY OF WALNUT

CITY OF WALNUT  
CITY CLERKS OFFICE

Division, Board, Department, District, if applicable

Your Position

COUNCIL MEMBER

► If filing for multiple positions, list below or on an attachment.

Agency: SEE ATTACHED

Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County \_\_\_\_\_

☐ County of \_\_\_\_\_

☒ City of WALNUT

☐ Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2012, through December 31, 2012.

☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

-or-

The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through December 31, 2012.

☐ The period covered is January 1, 2012, through the date of leaving office.

☐ Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate: Election year \_\_\_\_\_ and office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 6

☒ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

5. Verification

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed

3/25/13

(month, day, year)

Extended Statement of Economic Interests 2012 – Form 700 – Mary Su

Walnut Housing Authority

Walnut Public Financing Authority

Successor Agency

County Sanitation Districts 21 & 22 of Los Angeles

San Gabriel Valley Mosquito & Vector Control District

## Investments

## Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

*Do not attach brokerage or financial statements.*

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name \_\_\_\_\_

MARY SU

▶ NAME OF BUSINESS ENTITY  
Simplicity Bank Corp

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
\_\_\_\_\_

FAIR MARKET VALUE

☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_  
(Describe)

☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
Vertex pharmaceutical

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
\_\_\_\_\_

FAIR MARKET VALUE

☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☒ Stock      ☐ Other \_\_\_\_\_  
(Describe)

☐ Partnership      ☐ Income Received of \$0 - \$499  
                                 ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12  
ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY \_\_\_\_\_

GENERAL DESCRIPTION OF BUSINESS ACTIVITY \_\_\_\_\_

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock      ☐ Other \_\_\_\_\_

(Describe)

☐ Partnership      ☐ Income Received of \$0 - \$499

☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12

ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY

---

GENERAL DESCRIPTION OF BUSINESS ACTIVITY

---

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock      ☐ Other \_\_\_\_\_

(Describe)

☐ Partnership      ☐ Income Received of \$0 - \$499

☐ Income Received of \$500 or More (*Report on Schedule C*)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12

ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY \_\_\_\_\_

GENERAL DESCRIPTION OF BUSINESS ACTIVITY \_\_\_\_\_

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock      ☐ Other \_\_\_\_\_ (Describe)

☐ Partnership      ☐ Income Received of \$0 - \$499

☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/12      \_\_\_\_/\_\_\_\_/12

ACQUIRED      DISPOSED

► NAME OF BUSINESS ENTITY \_\_\_\_\_

GENERAL DESCRIPTION OF BUSINESS ACTIVITY \_\_\_\_\_

FAIR MARKET VALUE

☐ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000

☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT

☐ Stock      ☐ Other \_\_\_\_\_ (Describe)

☐ Partnership      ☐ Income Received of \$0 - \$499

☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:

\_\_\_\_\_/\_\_\_\_\_/12      \_\_\_\_\_/\_\_\_\_\_/12

ACQUIRED      DISPOSED

**Comments:**

**SCHEDULE D**  
**Income - Gifts**

|  |
|--|
| <b>CALIFORNIA FORM 700</b><br>FAIR POLITICAL PRACTICES COMMISSION<br>Name<br>MARY SU |
|--|

▶ NAME OF SOURCE (Not an Acronym)  
Toyce Johnny Tsai  
 ADDRESS (Business Address Acceptable)  
22133 pommel ct  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Walnut CA 91789  
 DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  
4/25/12 \$ 100 flower  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
DR Bill Scroggis / Mt Sac trustees  
 ADDRESS (Business Address Acceptable)  
1100 N. Grand Ave Walnut CA 91789  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Mayor inauguration  
 DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  
4/25/12 \$ 150 flower  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
Michelle Shih  
 ADDRESS (Business Address Acceptable)  
756 Arabian Ln Walnut  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Mayor inauguration  
 DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  
4/25/12 \$ 50 flower  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
Iven Pei  
 ADDRESS (Business Address Acceptable)  
20940 Walnut Canyon rd Walnut  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Mayor inauguration  
 DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  
4/25/12 \$ 50 flower  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
John Wang  
 ADDRESS (Business Address Acceptable)  
19889 Calle Granada Walnut  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Mayor inauguration  
 DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  
4/25/12 \$ 60 flower  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

▶ NAME OF SOURCE (Not an Acronym)  
Kent & Shelly Lai  
 ADDRESS (Business Address Acceptable)  
P.O. Box 98 Walnut  
 BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Mayor inauguration  
 DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)  
4/25/12 \$ 110 flower  
 \_\_\_\_\_ \$ \_\_\_\_\_  
 \_\_\_\_\_ \$ \_\_\_\_\_

Comments: \_\_\_\_\_

# SCHEDULE D Income - Gifts

|                                     |  |
|-------------------------------------|--|
| <b>CALIFORNIA FORM 700</b>          |  |
| FAIR POLITICAL PRACTICES COMMISSION |  |
| Name                                |  |
| MARY SU                             |  |

NAME OF SOURCE (Not an Acronym)  
USA Beigin Association

ADDRESS (Business Address Acceptable)  
26238 Delta Dr Danville CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Mayan Znaugnation

| DATE (mm/dd/yy) | VALUE  | DESCRIPTION OF GIFT(S) |
|-----------------|--------|------------------------|
| 4/25/12         | \$ 100 | flower                 |
| ___/___/___     | \$     |                        |
| ___/___/___     | \$     |                        |

NAME OF SOURCE (Not an Acronym)  
Tina Van

ADDRESS (Business Address Acceptable)  
462 Vista del Norte Walnut

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Mayan Znaugnation

| DATE (mm/dd/yy) | VALUE  | DESCRIPTION OF GIFT(S) |
|-----------------|--------|------------------------|
| 4/25/12         | \$ 100 | flower                 |
| ___/___/___     | \$     |                        |
| ___/___/___     | \$     |                        |

NAME OF SOURCE (Not an Acronym)  
SAT Professionals

ADDRESS (Business Address Acceptable)  
21316 Pathfinder Road D. B

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Mayan Znaugnation

| DATE (mm/dd/yy) | VALUE  | DESCRIPTION OF GIFT(S) |
|-----------------|--------|------------------------|
| 4/25/12         | \$ 100 | flower                 |
| ___/___/___     | \$     |                        |
| ___/___/___     | \$     |                        |

NAME OF SOURCE (Not an Acronym)  
Sher Li

ADDRESS (Business Address Acceptable)  
1230 Santa Anita E/monite

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Mayan Znaugnation

| DATE (mm/dd/yy) | VALUE  | DESCRIPTION OF GIFT(S) |
|-----------------|--------|------------------------|
| 4/25/12         | \$ 100 | flower                 |
| ___/___/___     | \$     |                        |
| ___/___/___     | \$     |                        |

NAME OF SOURCE (Not an Acronym)  
Harry Levi

ADDRESS (Business Address Acceptable)  
1744 S Nagales Street Rowland Heights

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Mayan Znaugnation

| DATE (mm/dd/yy) | VALUE  | DESCRIPTION OF GIFT(S) |
|-----------------|--------|------------------------|
| 4/25/12         | \$ 100 | flower                 |
| ___/___/___     | \$     |                        |
| ___/___/___     | \$     |                        |

NAME OF SOURCE (Not an Acronym)  
Charleen Yeh

ADDRESS (Business Address Acceptable)  
1613 Chelsea Rd San Marino

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Mayan Znaugnation

| DATE (mm/dd/yy) | VALUE  | DESCRIPTION OF GIFT(S) |
|-----------------|--------|------------------------|
| 4/25/12         | \$ 100 | flower                 |
| ___/___/___     | \$     |                        |
| ___/___/___     | \$     |                        |

Comments: \_\_\_\_\_

# **SCHEDULE D** **Income – Gifts**

|  |
|--|
| <b>CALIFORNIA FORM 700</b><br>FAIR POLITICAL PRACTICES COMMISSION<br>Name<br>MARY SU |
|--|

► NAME OF SOURCE (Not an Acronym)  
 Shirley Ho

ADDRESS (Business Address Acceptable)  
 430 Palisade Way Walnut

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Mayor Inauguration

| DATE (mm/dd/yy) | VALUE    | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 4/25/12         | \$ 100   | flower                 |
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |

► NAME OF SOURCE (Not an Acronym)  
 Grace Lee

ADDRESS (Business Address Acceptable)  
 907 White Place Diamond Bar

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Mayor Inauguration

| DATE (mm/dd/yy) | VALUE    | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 4/25/12         | \$ 100   | flower                 |
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |

► NAME OF SOURCE (Not an Acronym)  
 M/Sac Foundation

ADDRESS (Business Address Acceptable)  
 1100 N. Grand Ave Walnut

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 special event

| DATE (mm/dd/yy) | VALUE    | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 11/09/12        | \$ 65    | Dinner                 |
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |

► NAME OF SOURCE (Not an Acronym)  
 Regional Chamber

ADDRESS (Business Address Acceptable)  
 19720 E Walnut Ave Walnut

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
 Small Dinner

| DATE (mm/dd/yy) | VALUE    | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| 6/8/12          | \$ 90    | Dinner                 |
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE    | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |

► NAME OF SOURCE (Not an Acronym)

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

| DATE (mm/dd/yy) | VALUE    | DESCRIPTION OF GIFT(S) |
|-----------------|----------|------------------------|
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |
| ____/____/____  | \$ _____ | _____                  |

Comments: \_\_\_\_\_